## Case 16-82727 Doc 1 Filed 11/21/16 Entered 11/21/16 17:09:41 Desc Main Document Page 1 of 52

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	Abou	t Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Dawn First name  J. Middle name  Conti Last name and Suffix (Sr., Jr., II, III)		e name
2.	All other names you have used in the last 8 years	Dawn J Robinson		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9114		

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Case number (if known)

Debtor 1 Dawn J. Conti

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 123 Dawn Avenue Rockford, IL 61107 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Winnebago County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Dawn J. Conti

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.				
	choosing to file under	■ Cha	pter 7			
		☐ Cha	pter 11			
		☐ Cha	pter 12			
		☐ Cha				
8.	How you will pay the fee	a 0	bout how yo	u may pay. Typically, if you are paying the fee attorney is submitting your payment on your be	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with	
				the fee in installments. If you choose this op a in Installments (Official Form 103A).	tion, sign and attach the Application for Individuals to Pay	
		□ I b a	request that out is not requipplies to you	my fee be waived (You may request this opti ired to, waive your fee, and may do so only if r family size and you are unable to pay the fee	on only if you are filing for Chapter 7. By law, a judge may, your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out	
		tr	ne <i>Applicatio</i>	n to Have the Chapter 7 Filing Fee Waived (Of	ficial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the last 8 years?	■ No.				
			District	When	Case number	
			District	When	Case number	
			District	When	Case number	
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
			Debtor		Relationship to you	
			District	When	Case number, if known	
			Debtor		Relationship to you	
			District	When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to li	ne 12.		
	residence:	☐ Yes.	Has yo	ır landlord obtained an eviction judgment agai	nst you and do you want to stay in your residence?	
				No. Go to line 12.		
				Yes. Fill out <i>Initial Statement About an Eviction</i>		

Debtor 1	Dawn J. Conti	Document	Page 4 of 52 Case number (if known)	

ar	3: Report About Any Bu	sinesses	You Own	as a Sole Proprieto	r		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busin	ness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	& ZIP Code		
	it to this petition.		Check	the appropriate box	to describe your business:		
				Health Care Busine	ss (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as def	fined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	s. If you in	dicate that you are a low statement, and fed	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	■ No.	I am n	ot filing under Chapte	er 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi	ing under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention		
4.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	■ No.  ☐ Yes.	What is t	ne hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		ŕ	the property?	Number, Street, City, State & Zip Code		

Debtor 1 Dawn J. Conti Document Page 5 of 52 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

## ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Dawn J. Conti		Documen	Ca	se number (if known)		
Pari	t 6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.		nsumer debts? Consumer deb onal, family, or household purpos		C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		siness debts? Business debts to			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you ow	ve that are not consumer debts of	or business debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.		o you estimate that after any exilable to distribute to unsecured		d and administrative expenses	
	administrative expenses are paid that funds will		■ No				
	be available for distribution to unsecured creditors?		☐ Yes				
18.		<b>1</b> -49		□ 1,000-5,000	□ 25,00	1-50,000	
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	•	1-100,000	
		□ 100-1 □ 200-9		□ 10,001-25,000	⊔ More	than100,000	
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 millio	on 🗆 \$500,	000,001 - \$1 billion	
	estimate your assets to be worth?	<b>\$</b> 50,0	01 - \$100,000	□ \$10,000,001 - \$50 mil		0,000,001 - \$10 billion	
			001 - \$500,000	□ \$50,000,001 - \$100 mi □ \$100,000,001 - \$500 n		00,000,001 - \$50 billion than \$50 billion	
		<b>□</b> \$500,	001 - \$1 million	<b>—</b> \$100,000,001 - \$300 п	million 🗀 More	than \$50 billion	
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 millio	on 🗆 \$500,	000,001 - \$1 billion	
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 mil		00,000,001 - \$10 billion	
			001 - \$500,000	□ \$50,000,001 - \$100 mi □ \$100,000,001 - \$500 n		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
		<b>□</b> \$500,	001 - \$1 million	<b>—</b> \$100,000,001 - \$300 п	Illillori 🗀 iviore		
Part	7: Sign Below						
For	you	I have ex	amined this petition, and I decla	are under penalty of perjury that	the information provided	d is true and correct.	
				I am aware that I may proceed, lief available under each chapte			
				ot pay or agree to pay someone notice required by 11 U.S.C. §		help me fill out this	
		I request	relief in accordance with the ch	napter of title 11, United States (	Code, specified in this pe	tition.	
		bankrupt and 3571	cy case can result in fines up to	concealing property, or obtaining \$250,000, or imprisonment for			
		/s/ Daw Dawn J	n J. Conti . Conti	Signature	e of Debtor 2		
			e of Debtor 1	oignature	:		
		Executed		Executed			
			MM / DD / YYYY		MM / DD / YYYY		

Debtor 1 Dawn J. Conti Document Page 7 of 52 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel /	A. Springer	Date	November 21, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	Springer		
Printed name			
Springer L	.aw Firm		
Firm name			
2222 E Sta	ite St		
Suite 107			
Rockford,	IL 61104		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Bar number & St	tate		

		1700.11111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Dawn J. Conti			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is
				amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	46,585.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	41,375.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	87,960.0
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	91,507.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	32,883.0
	Your total liabilities	\$	124,390.00
Pa:	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,576.23
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,526.0
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	2 004 04
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	\$ 3,084.91

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	24,613.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	24,613.00

			Docu	ıment	Page 10 of 52			
Fill in this inform	ation to identify you	ir case and th	is filing:					
Debtor 1	Dawn J. Conti							
Debtor 2	First Name	Middle	Name		Last Name			
(Spouse, if filing)	First Name	Middle	Name		Last Name			
United States Ban	kruptcy Court for the:	NORTHER	N DISTR	ICT OF ILLI	NOIS			
Case number					-		I	☐ Check if this is an amended filing
Official For	m 106A/P							
_	: A/B: Pro	nertv						12/15
			an asset o	nly once If a	n asset fits in more than or	ne category list	t the asset in th	
information. If more Answer every questi	space is needed, attac on.	h a separate sh	neet to this	s form. On th	e are filing together, both ar e top of any additional page nn or Have an Interest In			
1. Do you own or ha	ve any legal or equital	ole interest in a	ny resider	nce, building,	land, or similar property?			
□ No. Go to Part	2							
Yes. Where is								
- res. Where is	ine property?							
1.1  123 Dawn A  Street address, if  Rockford  City	available, or other description	I 107-0000  ZIP Code		Single-family I Duplex or mul Condominium	ti-unit building or cooperative or mobile home	the amount Creditors W  Current val entire prop	of any secured tho Have Claims ue of the	ms or exemptions. Put claims on Schedule D: s Secured by Property.  Current value of the portion you own?  \$46,585.00
Oity	Ciale	Zii Code	_	Timeshare	operty			ur ownership interest
			Who ha	Other  as an interest  Debtor 1 only	in the property? Check one	(such as fe	e simple, tenai e), if known.	ncy by the entireties, or
Winnebago	)			Debtor 2 only				
County			Debtor 1 and Debtor 2 only			(see inst	ck if this is community property nstructions) local	
			proper	ty identificati	on number:			
					rom Part 1, including an		=>	\$46,585.00
Part 2: Describe Y	our Vehicles							
Do you own, lease	e, or have legal or e				whether they are register executory Contracts and U			nicles you own that
3. Cars, vans, true	cks, tractors, sport	utility vehicles	s, motoro	cycles				

Official Form 106A/B Schedule A/B: Property page 1

☐ Yes

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Case number (if known) Document Debtor 1 Dawn J. Conti 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$1,275.00 Living Room Set, Mattress, Household Furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... TV , Cellphone \$670.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... **Used Clothing** \$100.00 12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

Yes. Describe.....

Earrings, Wedding Ring Set

\$1,600.00

De	btor 1	Case 16-8		Doc 1		.1/21/16 iment	Entered 11/ Page 12 of 5	21/16 17:09:41 2 Case number (if known)	Desc Main
		Dawn o. oon							
	<i>Examp</i> □ No -	rm animals oles: Dogs, cats, I Describe	birds, horse	es					
			Thuas	<b>\</b>					\$30.00
			Three C	ats					<del></del>
	■ No	her personal and			u did not al	ready list, i	ncluding any health	aids you did not list	
15.		he dollar value our talle our t					ny entries for pages	you have attached	\$3,675.00
Pai	rt 4: Des	scribe Your Finance	cial Assets						
Do	you ow	n or have any le	egal or eq	uitable inter	est in any c	of the follow	ring?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	oles: Money you h					osit box, and on hand	when you file your petit	on
							of deposit; shares in catitution, list each.	credit unions, brokerage	houses, and other similar
						Institution r	name:		
			17.1.	Checking		US Bank	(		\$200.00
	Examp ■ No	, <b>mutual funds</b> , o bles: Bond funds,	investmen		ith brokerag		ney market accounts		
	joint v	-	ock and in	iterests in in	corporated	d and uninc	orporated business	es, including an interes	st in an LLC, partnership, and
	■ No □ Yes.	Give specific info		bout them e of entity:				% of ownership:	
	Negotia Non-ne	able instruments	include pe	rsonal check	s, cashiers'	checks, pro	egotiable instrumen missory notes, and m by signing or deliveri	oney orders.	
	■ No □ Yes.	Give specific info		oout them er name:					
		nent or pension bles: Interests in I		A, Keogh, 40 <sup>-</sup>	1(k), 403(b),	, thrift saving	s accounts, or other p	pension or profit-sharing	plans
	Yes. I	List each accoun	•	y. account:		Institution r	name:		
			401(k)			Employe	r 401k		\$7,500.00

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Case number (if known) Document Debtor 1 Dawn J. Conti 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2016 Tax Refund **Federal** Unknown 2016 Tax Refund Unknown State 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information.....

**Back Child Support Child Support** \$30,000.00

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

Dobtor 1	Case 16-82727	Doc 1	Filed 11/21/16 Document	Entered 11/21/16 17:09:41 Page 14 of 52 Case number (if known)	Desc Main
Debtor 1	Dawn J. Conti			Case number (if known)	
	ests in insurance policies mples: Health, disability, or lif	fe insurance; h	nealth savings account (l	HSA); credit, homeowner's, or renter's insurar	nce
☐ Yes	s. Name the insurance comp Con	any of each pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
If you some No	nterest in property that is a are the beneficiary of a living eone has died.  s. Give specific information	ng trust, exped	someone who has die at proceeds from a life in	d surance policy, or are currently entitled to rec	eive property because
Exar ■ No	ns against third parties, what mples: Accidents, employments.  Describe each claim	nt disputes, in		t or made a demand for payment to sue	
34. Other	r contingent and unliquida	ted claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
■ No					
☐ Yes	s. Describe each claim				
35. <b>Anv</b> f	inancial assets you did no	t already list			
■ No	,				
☐ Yes	s. Give specific information				
	_			ny entries for pages you have attached	\$37,700.00
Part 5:	Describe Any Business-Related	d Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
37. <b>Do yo</b> u	u own or have any legal or equ	itable interest	in any business-related pr	roperty?	
■ No. (	Go to Part 6.				
☐ Yes.	Go to line 38.				
	Describe Any Farm- and Comm f you own or have an interest in f			n or Have an Interest In.	
46 Do v	ou own or have any legal o	r equitable in	terest in any farm- or o	commercial fishing-related property?	
-	o. Go to Part 7.	r equitable in	nerest in any farin- or c	online clai hannig related property:	
	es. Go to line 47.				
Part 7:	Describe All Property You	Own or Have a	an Interest in That You Did	Not List Above	
53. <b>Do yo</b>	ou have other property of a	any kind you o	did not already list? ership		

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

☐ Yes. Give specific information.......

■ No

\$0.00

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Case number (if known) Document Debtor 1 Dawn J. Conti

Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$46,585.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$3,675.00		
58.	Part 4: Total financial assets, line 36	\$37,700.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$41,375.00	Copy personal property total	\$41,375.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$87,960.00

Official Form 106A/B Schedule A/B: Property page 6

		I A A A HI III.	111 1 11111 1111 1111	17	
Fill in this infor	mation to identify your	case:			
Debtor 1	Dawn J. Conti				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amou	unt of the exemption you claim	Specific laws that allow exemption	
Copy the value from Schedule A/B	Chec	k only one box for each exemption.		
\$1,275.00		\$1,275.00	735 ILCS 5/12-1001(b)	
	☐ 100% of fair market value, up to any applicable statutory limit			
\$670.00		\$670.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$100.00		\$100.00	735 ILCS 5/12-1001(a)	
		· •		
\$1,600.00	•	\$1,600.00	735 ILCS 5/12-1001(a)	
		The state of the s		
\$30.00		\$30.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
	\$1,600.00	\$1,600.00	Check only one box for each exemption.  \$1,275.00  \$1,275.00  \$1,00% of fair market value, up to any applicable statutory limit  \$670.00  \$100% of fair market value, up to any applicable statutory limit  \$100.00  \$100% of fair market value, up to any applicable statutory limit  \$100.00  \$100% of fair market value, up to any applicable statutory limit  \$1,600.00  \$1,600.00  \$1,600.00  \$30.00  \$30.00	

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Case number (if known)

Deni	Dawii J. Collii				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che		
	401(k): Employer 401k Line from Schedule A/B: 21.1	\$7,500.00		\$7,500.00	735 ILCS 5/12-1006
'	Ellie Holli Gorioddie / V.E. = 111			100% of fair market value, up to any applicable statutory limit	
	Federal: 2016 Tax Refund Line from Schedule A/B: 28.1	Unknown		\$1,500.00	735 ILCS 5/12-1001(b)
	Line Holli Schedule AVB. 20.1			100% of fair market value, up to any applicable statutory limit	
	State: 2016 Tax Refund Line from Schedule A/B: 28.2	Unknown		\$525.00	735 ILCS 5/12-1001(b)
'	Ellie Holli Schedule A/B. 20.2			100% of fair market value, up to any applicable statutory limit	
	Child Support: Back Child Support Line from Schedule A/B: 29.1	\$30,000.00		100%	735 ILCS 5/12-1001(g)(4)
'	Line Holli Schedule A/D. 25.1			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
	No				
	☐ Yes. Did you acquire the property cover	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

C	Jase 16-82/2/			11/21/16 17:0	)9:41 Desc i	viain
Fill in this info	ormation to identify you		ne 18 o	15/		
riii iii uiis iiiid	ormation to identity you	ii case.				
Debtor 1	Dawn J. Conti	Middle Norse	lama.			
Debtor 2	FIRST Name	Middle Name Last N	vame			
(Spouse if, filing)	First Name	Middle Name Last N	Name			
United States I	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS	;			
Casa numbar						
Case number (if known)					☐ Chec	k if this is an
					_	nded filing
~						
Official Fo	<u>rm 106D</u>					
Schedul	e D: Creditors	Who Have Claims Sec	ured l	by Property	y	12/15
Be as complete	and accurate as possible.	If two married people are filing together, bot	h are equal	ly responsible for su	pplying correct inform	ation. If more space
	the Additional Page, fill it	out, number the entries, and attach it to this				
. Do any credito	ors have claims secured by	your property?				
☐ No. Che	eck this box and submit the	his form to the court with your other sched	ules. You l	have nothing else to	report on this form.	
Yes. Fil	I in all of the information	below.				
Part 1: List	All Secured Claims					
		more than one secured claim, list the creditor se	narately	Column A	Column B	Column C
for each claim. I	f more than one creditor has	a particular claim, list the other creditors in Par cal order according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Nations	star Mortgage	Describe the property that secures the clai	im:	value of collateral. \$91,507.00	section \$93,170.00	If any <b>\$0.00</b>
Creditor's N		123 Dawn Ave Rockford, IL 61107		Ψσ1,σσ11σσ	400,170,00	
		Winnebago County				
350 Hig	hland Drive	As of the date you file, the claim is: Check a	Il that			
	ille, TX 75067	apply.  ☐ Contingent				
	reet, City, State & Zip Code	☐ Unliquidated				
, , , ,	, , , , , , , , , , , , , , , , , , , ,	☐ Disputed				
Who owes the	debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only	/	■ An agreement you made (such as mortgage	ae or secure	ed		
Debtor 2 only	/	car loan)	,			
Debtor 1 and	Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	s lien)			
At least one of	of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this community	s claim relates to a debt	Other (including a right to offset)				
Date debt was i	ncurred <u>07/2009</u>	Last 4 digits of account number				
Add the dollar	r value of your entries in C	olumn A on this page. Write that number her	re·	\$91,50	7 00	
	•	the dollar value totals from all pages.	<b>.</b>			
Write that nur		. 5		\$91,50	7.00	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0000 10 02727	Document	Page 1	9 of 52	T DC30 Main
Fill in this in	formation to identify your		1 121 11 1		
Debtor 1	Dawn J. Conti				
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		
Case numbe	r				
(if known)					☐ Check if this is an
					amended filing
Official F	orm 106E/F				
		/ho Have Unsecured	Claime		12/15
				D. 404 III III NON	PRIORITY claims. List the other party to
Schedule D: Co left. Attach the	reditors Who Have Claims Sec		needed, copy	the Part you need, fill it out, n	ecured claims that are listed in number the entries in the boxes on the op of any additional pages, write your
Part 1: Li	st All of Your PRIORITY Ur	nsecured Claims			
1. Do any cr	editors have priority unsecure	ed claims against you?			
No. Go	to Part 2.				
☐ Yes.					
Part 2: Li	st All of Your NONPRIORIT	TY Unsecured Claims			
3. Do any cr	editors have nonpriority unse	cured claims against you?			
□ No. Yo	u have nothing to report in this p	part. Submit this form to the court with	your other sch	nedules.	
Yes.					
unsecured	I claim, list the creditor separatel	laims in the alphabetical order of the y for each claim. For each claim listed ist the other creditors in Part 3.If you	d, identify what	type of claim it is. Do not list cla	ims already included in Part 1. If more
					Total claim
4.1 <b>Arm</b>	or System Corp	Last 4 digits of acc	count number		\$183.00
Nonp	riority Creditor's Name				<u> </u>
	) Kiffer Drive 1	When was the deb	t incurred?	09/2014	
	or Street City State Zlp Code	As of the date you	file. the claim	is: Check all that apply	
	incurred the debt? Check one.		,	an anat apply	
■ De	ebtor 1 only	☐ Contingent			
_	ebtor 2 only	☐ Unliquidated			
	ebtor 1 and Debtor 2 only	☐ Disputed			
	least one of the debtors and an	_ `	RITY unsecure	ed claim:	
	heck if this claim is for a com				
debt	HEGK II HIIS CIAIIII IS IOF A COM	inunity	ng out of a sen	paration agreement or divorce that	at vou did not
Is the	claim subject to offset?	report as priority cla			,
■ No	0	☐ Debts to pension	n or profit-shari	ing plans, and other similar debts	5
□ Ye	es	Other, Specify	Medical Co	ollections	

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DCDIOI	Dawii J. Coliti	Odde Halliber (II know)	
4.2	Capital One Bank USA NA	Last 4 digits of account number	\$343.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 30281	When was the debt incurred? 08/2004	
	Salt Lake City, UT 84130		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes		
	Yes	Other. Specify Credit Card Purchases	
4.3	Capital One Bank USA NA	Last 4 digits of account number	\$908.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept.	When was the debt incurred? 12/2013	
	PO Box 30281	12/2010	
	Salt Lake City, UT 84130	_	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
	City of Rockford EAS Ambulance		
4.4	Svc.	Last 4 digits of account number	\$700.00
	Nonpriority Creditor's Name		
	204 S. 1st Street Rockford, IL 61104	When was the debt incurred? 01/2014	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify Medical Debt	

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Debtor 1 Dawn J. Conti Case number (if know) 4.5 \$738.00 **Credit One Bank** Last 4 digits of account number Nonpriority Creditor's Name Attn: Banruptcy Dept. When was the debt incurred? 05/2015 PO Box 98873 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes 4.6 **Credit One Bank** Last 4 digits of account number \$480.00 Nonpriority Creditor's Name When was the debt incurred? 05/2016 Attn: Banruptcy Dept. PO Box 98872 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card Purchases** Other. Specify **Dept of Ed/Navient** \$24,613.00 Last 4 digits of account number Nonpriority Creditor's Name 12/2010 PO Box 9635 When was the debt incurred? Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify **Student Loans** 

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Dawn J. Conti		Case number (if know)	
First Premier Bank	Last 4 digits of account number		\$229.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept. 3820 N Louise Ave	When was the debt incurred?	08/2004	
Sioux Falls, SD 57107  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	7.0 0 uu.o <b>y</b> ou, o.u	on on an anatappiy	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	paration agreement or divorce that you did not	
■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
Yes	Other. Specify Credit Car	d Purchases	
Kohls/CapOne	Last 4 digits of account number		\$1,030.00
Nonpriority Creditor's Name PO BOX 3115	When was the debt incurred?	05/2013	
Milwaukee, WI 53201	_		
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	paration agreement or divorce that you did not	
■ No	Debts to pension or profit-shari	ing plans, and other similar debts	
Yes	Other Specify Credit Car	d Purchases	
Mutual Management Svcs Co, LLC			\$533.00
Nonpriority Creditor's Name	Last 4 digits of account number		φ333.00
Attn: Bankruptcy Dept PO Box 8740	When was the debt incurred?	03/2015	
Rockford, IL 61126  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim	ть. Спеск ан так арру	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community debt	Student loans		
Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	paration agreement or divorce that you did not	
■ No	Debts to pension or profit-shari	ing plans, and other similar debts	
☐ Yes	■ Other Specify Medical Co	ollections	
- <del>-</del>	- Outer, Opecity		

Document Page 23 of 52 Debtor 1 Dawn J. Conti Case number (if know) 4.1 \$70.00 **Physicians Immediate Care** Last 4 digits of account number Nonpriority Creditor's Name 1663 Belvidere Rd When was the debt incurred? 01/2012 Belvidere, IL 61008 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Debt 4.1 **Rockford Health Physicians** \$103.00 Last 4 digits of account number Nonpriority Creditor's Name Attn Bankruptcy Dept. When was the debt incurred? 01/2012 Department 4701 Carol Stream, IL 60122-4701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes 4.1 Rockford Pain Center Ld \$280.00 3 Last 4 digits of account number Nonpriority Creditor's Name 2902 McFarland Rd #202 When was the debt incurred? 11/2014 Rockford, IL 61107 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Medical Debt

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

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Desc Main Document Page 24 of 52 Debtor 1 Dawn J. Conti Case number (if know) 4.1 SYNCB/Old Navy DC \$123.00 Last 4 digits of account number 4 Nonpriority Creditor's Name PO BOX 965005 When was the debt incurred? 05/2013 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card Purchases 4.1 SYNCB/Wal-Mart \$360.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 05/2013 PO Box 965024 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes 4.1 TD Bank USA/Target Credit \$244.00 6 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 05/2013 PO Box 673 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes

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Page 25 of 52 Case number (if know) Document Debtor 1 Dawn J. Conti

4.1 7	US Bank	Last 4 digits of account number	per	\$746.00
	Nonpriority Creditor's Name PO Box 3447	When was the debt incurred?	06/2016	
	Oshkosh, WI 54903  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsec	ured claim:	
	At least one of the debtors and another	Student loans	area ciann.	
	☐ Check if this claim is for a community debt		separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	separation agreement of divorce that you did not	
	■ No	Debts to pension or profit-sh	naring plans, and other similar debts	
	☐ Yes	Other. Specify Credit C	ard Purchases	
4.1	US Bank	Last 4 digits of account numb	per	\$1,200.00
	Nonpriority Creditor's Name PO Box 108	When was the debt incurred?	06/2011	
	Saint Louis, MO 63166  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sreport as priority claims	separation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sh	naring plans, and other similar debts	
	Yes	Other. Specify Credit C	ard Purchases	
Part 3	List Others to Be Notified About a De	ebt That You Already Listed		
is tr	this page only if you have others to be notified ying to collect from you for a debt you owe to s e more than one creditor for any of the debts the fied for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor at you listed in Parts 1 or 2, list the a	or in Parts 1 or 2, then list the collection agency	y here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did	·	
	RCV SVC Bankruptcy Dept.	Line <u>4.13</u> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Clai	
	Harlem RD STE		■ Part 2: Creditors with Nonpriority Unsecured	Claims
Love	es Park, IL 61111	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
	itors Protection Service	Line <b>4.12</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claim	
	: Bankruptcy Dept. Box 4115		Part 2: Creditors with Nonpriority Unsecured	Claims
	rford, IL 61101			
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did		
	itors Protection Service	Line <b>4.11</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Clai	
	: Bankruptcy Dept. Box 4115		Part 2: Creditors with Nonpriority Unsecured	Claims
_	rford, IL 61101			
		Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	

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Debtor 1 Dawn J. Conti		Case number (if know)				
Equifax PO Box 740256	Line <b>4.1</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims				
Atlanta, GA 30374		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Additional Control of the Control of	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?				
Experian	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 4500 Allen, TX 75013		Part 2: Creditors with Nonpriority Unsecured Claims				
Alleli, TA 75015	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Rockford Mercantile Agency	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
Attn: BAnkruptcy Dept. PO Box 5847 Rockford, IL 61125		■ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?				
TransUnion	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
555 West Adams Street Chicago, IL 60661		Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number					

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				 
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 24,613.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 8,270.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 32,883.00

		I A A A A A A A A A A A A A A A A A A A		· /
Fill in this infor	rmation to identify your	case:		
Debtor 1	Dawn J. Conti			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)		-		

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	•				

		Document	Page 28 of	52	
Fill in this inf	formation to identify your	case:			
Debtor 1	Dawn J. Conti				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official F	Form 106H				
Schedu	le H: Your Cod	ebtors			12/15
name an  1. Do you  □ No ■ Yes	d case number (if known)  u have any codebtors? (If		ot list either spouse as	s a codebtor.	f any Additional Pages, write
Arizona, (	California, Idaho, Louisiana	Nevada, New Mexico, Puerto	Rico, Texas, Washing	gton, and Wisconsin.)	
■ No. Go	to line 3.				
☐ Yes. D	id your spouse, former spou	use, or legal equivalent live wit	h you at the time?		
in line 2	again as a codebtor only i 5D), Schedule E/F (Official	f that person is a guarantor of	or cosigner. Make su	ire you have listed the o	vith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill
	<i>lumn 1:</i> <b>Your codebtor</b> e, Number, Street, City, State and Z	P Code		Column 2: The credit Check all schedules the	or to whom you owe the debt hat apply:
183	nnie Robinson 32 Ridgeland Road ckford, IL 61108			■ Schedule D, line □ Schedule E/F, lin □ Schedule G  Nationstar Mortgag	 ne

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							ı				
	in this information to into the into the into the into the into the interest in the interest i	dentity your ca									
	otor 2 ouse, if filing)					_					
Uni	ted States Bankruptcy	/ Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
(If kr	se number						□ A		ed filing ent showing	g postpetition ollowing date:	chapter
	fficial Form 1						M	M / DD/ Y	YYY		
Be a sup spo atta	plying correct inform use. If you are separ ch a separate sheet	urate as poss nation. If you ated and you	Sille sible. If two married peo are married and not fili r spouse is not filing wi On the top of any additi	ng jointly, and your th you, do not inclu	spouse i ide infori	s liv natio	ing with on about	you, incl your spo	ude inform ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employ information.	ment		Debtor 1				Debtor 2	or non-fil	ing spouse	
	If you have more than one job, attach a separate page with information about additional employers.		separate page with Employment status on about additional		■ Employed □ Not employed			☐ Employed ☐ Not employed			
	Include part-time, se self-employed work.		Occupation Employer's name	Proccessing Te							
	Occupation may inc or homemaker, if it a		Employer's address	20 W 267 101St Lemont, IL 604							
Do	rt 2: Give Detai	la Abaut Marri	How long employed to	here? Three	Years			_			
<b>Esti</b> spou	mate monthly incomuse unless you are se	parated.	ate you file this form. If your than one employer, co	, s	•	,	•		•	,	Ü
	e space, attach a sepa						For Deb		For Deb	otor 2 or ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	3,	311.77	\$	N/A	
3.	Estimate and list m	nonthly overti	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Inc	come. Add lir	ne 2 + line 3.		4.	\$	3,31	11.77	\$	N/A	

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Deb	tor 1	Dawn J. Conti	_	(	Case	number (if knowi	7)				
					Fo	r Debtor 1			ebtor	2 or pouse	
	Cop	y line 4 here	4.		\$_	3,311.7	7	\$	iiiig 3	N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	505.4	4	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.0	_	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c		\$	99.3		\$		N/A	
	5d.	Required repayments of retirement fund loans	5d	١.	\$	0.0	_	\$		N/A	_
	5e.	Insurance	5e	<b>)</b> .	\$	130.7	_	\$		N/A	
	5f.	Domestic support obligations	5f.		\$	0.0	0	\$		N/A	<u> </u>
	5g.	Union dues	5g	J.	\$	0.0	0	\$		N/A	<u> </u>
	5h.	Other deductions. Specify:	5h	1.+	\$_	0.0	0	+ \$		N/A	\
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	735.5	4	\$		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,576.2	3_	\$		N/A	<u>\</u>
8.	8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$_	0.0		\$		N/A	
	8b.	Interest and dividends	8b	).	\$_	0.0	0_	\$		N/A	<u>\</u>
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	8c 8d 8e	۱.	\$_ \$_ \$_	0.0 0.0 0.0	0	\$ \$ \$		N/A N/A N/A	_
		Nutrition Assistance Program) or housing subsidies.					_	•			
	0	Specify:	_ 8f.		\$_	0.0	_	\$		N/A	_
	8g. 8h.	Pension or retirement income	8g 8h		\$_ \$	0.0				N/A	_
	OII.	Other monthly income. Specify:	_ 011	ı. <del>.</del>	Ψ_	0.0	<u> </u>	ΤΨ		N/A	<u></u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$_	0.0	0	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,576.23 +	\$		N/A	= \$	2,576.23
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		2,370.23	Ψ_		13/A	- Ψ -	2,370.23
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe						hedule		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	2,576.23
4.5	_		_						ι	Combi	ined ly income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?								
	_	Yes Explain:									

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<b></b>					
FIII I	in this information to identify your case:				
Debt	Dawn J. Conti		Che	ck if this is:	
Dala	44-0			An amended filing	January to a CC and a band and
	ouse, if filing)			13 expenses as of	ving postpetition chapter the following date:
(-	,				
Unite	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLI	INOIS		MM / DD / YYYY	
Case	se number				
(If kr	nown)				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/15
Be a	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to thimber (if known). Answer every question.				
Part					
1.	Is this a joint case?				
	No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expens</i> e	on for Congrete House	hald of Dah	ator O	
	Tes. Debtor 2 must file Official Form 1063-2, Expense	es for Separate House	inola of Dec	OLOT 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		8	■ Yes
					□ No
		Son		13	Yes
					□ No
					Yes
					□ No
3.	Do your expenses include ■ No				☐ Yes
J.	expenses of people other than yourself and your dependents?				
Esti exp app	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a supplicable date.	pplemental Schedule			
the	lude expenses paid for with non-cash government assistance value of such assistance and have included it on Schedule I: ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	. Include first mortgage	e 4. \$	\$	0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b. 9		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$	\$	0.00
_	4d. Homeowner's association or condominium dues		4d. \$	·	0.00
5	Additional mortgage payments for your residence, such as h	home equity loans	5 9	Κ.	0.00

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	Dawn J. Conti	Ousc Hulli	ber (if known)	
Utilit	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.		85.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		235.00
6d.	Other. Specify:	6d.		0.00
	d and housekeeping supplies	7.		800.00
	dcare and children's education costs	8.		10.00
	hing, laundry, and dry cleaning	9.		200.00
	conal care products and services	10.	·	100.00
	ical and dental expenses	11.		0.00
	sportation. Include gas, maintenance, bus or train fare.		·	
	ot include car payments.	12.	\$	175.00
3. Ente	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	20.00
. Chai	ritable contributions and religious donations	14.	\$	0.00
. Insu	rance.			
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	·	0.00
	Health insurance	15b.	· -	0.00
15c.	Vehicle insurance	15c.		116.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec	•	16.	\$	0.00
	allment or lease payments:		•	
	Car payments for Vehicle 1	17a.	·	435.00
	Car payments for Vehicle 2	17b.		0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as		\$	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.		
	er payments you make to support others who do not live with you.	19.	\$	0.00
Spec	तापुर. er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		our Incomo	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	· —	0.00
	Maintenance, repair, and upkeep expenses	20d.	· -	0.00
	Homeowner's association or condominium dues	20a. 20e.		0.00
			· -	
. Othe	er: Specify: Birthdays/Holidays/Haircuts		+\$	100.00
2. Calc	ulate your monthly expenses			
22a.	Add lines 4 through 21.		\$	2,526.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	,
	Add line 22a and 22b. The result is your monthly expenses.		\$	2,526.00
				2,020.00
	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	· -	2,576.23
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,526.00
23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	50.23
	The result is your <i>monthly net income</i> .	۷۵۵.	<u>Ψ</u>	00.20
For e	rou expect an increase or decrease in your expenses within the year after you cample, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage?			rease or decrease because of
_				
Y	es. Explain here. Debtor expects to be renting soon.			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Dawn J. Conti				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Forr	m 106Dec				
Declarat	tion About a	n Individual	Debtor's Sc	hedules	12/15
Doolara	TOTT ABOUT U	- IIIaiviaaai	DODIO: 0 00		12/13
If two married po	eonle are filing together	, both are equally respon	sible for supplying cor	rect information.	
two marriod p	oopio ai o iliilig togotiioi	, both are equally recipe	ioibio foi cappiying co.		
					ement, concealing property, or
	y or property by fraud ir 8 U.S.C. §§ 152, 1341, 1		ruptcy case can result	in fines up to \$250,00	00, or imprisonment for up to 20
years, or both. I	0 0.5.0. 33 152, 1541, 1	519, and 5571.			
Sia	n Below				
3					
Did you pa	y or agree to pay some	one who is NOT an attorr	ney to help you fill out I	bankruptcy forms?	
■ No					
☐ Yes. I	Name of person			Attach Bani	kruptcy Petition Preparer's Notice,
_	•			Declaration	, and Signature (Official Form 119)
Under nena	alty of periury I declare	that I have read the sumr	mary and schedules file	ed with this declaration	on and
	e true and correct.	mat i nave read the sum	nary and somedates me	,a with this acolaratio	on and
X /s/ Day	vn J. Conti		X		
	J. Conti		Signature of	Debtor 2	
	re of Debtor 1		2.3		

Date

Date **November 21, 2016** 

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Fill i	n this inform	nation to identify you	r case:			
Debt		Dawn J. Conti	- ducor			
Dobt	01 1	First Name	Middle Name	Last Name		
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
	-	nkruptcy Court for the:	NORTHERN DISTRICT (			
Office	o olaics bai	ikidpley Godit for the.	NORTHERN DIOTRIOT	or illustration		
Case (if known	e number wn)				_	Check if this is an amended filing
Sta Be as	complete a	of Financial		re filing together, both are	ankruptcy equally responsible for sup	
		n). Answer every ques		Lived Refere		
Part		current marital statu	rital Status and Where You	Lived Before		
l	■ Married □ Not mar					
			lived anywhere other than	whore you live new?		
2. 1	During the la	ist 3 years, have you	iived allywhere other than	where you live now :		
 	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>.</i>	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor co, Texas, Washington and V	
I	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	ificial Form 106H).		
Part	2 Explain	n the Sources of You	r Income			
F	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
[ 	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	exclusions) \$30,796.73	☐ Wages, commissions, bonuses, tips	and exclusions)
		-	☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Dawn J. Conti

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	ndar year: December 31	, 2015 )	■ Wages, commissions, bonuses, tips	\$32,000.00	☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating a business		Operating a	business	
		dar year befor December 31		■ Wages, commissions, bonuses, tips	\$31,000.00	☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
	and other winnings.  List each	public benefit public benefit public benefit p	payments; a joint cas gross inco	ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separar	rest; dividends; money colle- you received together, list it	cted from lawsuits; only once under D	royalties; ar ebtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pavn	nents You	Made Before You Filed for	Bankruptcv			
ô.	Are eithe No.	Neither Debtindividual prindividual prindivi	tor 1 nor I marily for a 0 days befor Go to line 7 List below to baid that created include	o's debts primarily consumed Debtor 2 has primarily consumed a personal, family, or household by the you filed for bankruptcy, die ach creditor to whom you paid reditor. Do not include payment payments to an attorney for the ton 4/01/19 and every 3 years.	Imer debts. Consumer debtld purpose."  d you pay any creditor a total d a total of \$6,425* or more ats for domestic support oblinis bankruptcy case.	al of \$6,425* or mo in one or more pa gations, such as cl	ore? yments and thild support a	the total amount you and alimony. Also, do
	Yes.			or both have primarily consu		al of \$600 or more	?	
		■ Yes L	nclude pay	7. each creditor to whom you pai ments for domestic support o r this bankruptcy case.				
	Creditor	's Name and A	Address	Dates of payme	nt Total amount	Amount you still owe	Was this	payment for
		s State Bank Main St. <sub>-</sub> 61048		Monthly	\$435.00	\$17,000.00		

☐ Other\_\_

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					
	Yes. List all payments to an insider.				_	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.					
	☐ Yes. List all payments to an insider  Insider's Name and Address	Dates of navment	Total amount	Amount you	Passan for t	hia navmant
	Insider's Name and Address	Dates of payment	Total amount Amount you paid still owe		Reason for this payment Include creditor's name	
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?  List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.  No  Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Nationstar Mortgage LLC v. Dawn Conti et al. 2016 CH 175	Foreclosure	Winnebago Co Court 400 W State St Rockford, IL 61	-	■ Pending □ On appeal □ Concluded	
10.	Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address  Describe the Property  Date  Value of the					
		Explain what happened				property
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an  ■ No □ Yes		rty in the possessi			fit of creditors, a

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Pai	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No □ Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankrup  No  Yes. Fill in the details for each gift or cor		did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value		
Pa	rt 6: List Certain Losses						
15.	Within 1 year before you filed for bankrupt or gambling?  ■ No □ Yes. Fill in the details.	tcy o	or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,		
	how the loss occurred	ncluc	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost		
Pai	rt 7: List Certain Payments or Transfers						
16.	consulted about seeking bankruptcy or pr	epar	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services require		erty to anyone you		
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and value of any property transferred	Date payment or transfer was made	Amount of payment		
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104		Legal Fees	11/2016	\$500.00		
	001DebtorCC 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org		\$14.95	10/24/2016	\$14.95		
17.	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that you	tors		or transfer any prope	erty to anyone who		
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>						
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment		

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Debtor 1 Dawn J. Conti

	Person Who Was Paid Address	Description and v transferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment
	Family Credit Management 4306 Charles St. Rockford, IL 61108	\$83/biweekly			2014 - 10/2016	\$4,316.00
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already lies.	iness or financial affa e as security (such as t	nirs? he granting of a se			
	No No					
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and v property transferr			nny property or received or debts change	Date transfer was made
	Person's relationship to you				J	
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.					
	Name of trust	Description and v	alue of the prope	rty transform	ad	Date Transfer was
	rune of trust	Description and v	alac of the prope	rty transferre	,u	made
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa  No Yes. Fill in the details.	other financial accour	nts; certificates of			
		ast 4 digits of ccount number	Type of account instrument	clo	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, any	safe deposit	box or other depos	itory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the o	contents	Do you still have it?
22.	Have you stored property in a storage unit or p	•	home within 1 ye	ar before yo	u filed for bankrupto	cy?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S		escribe the o	contents	Do you still have it?
		State and ZIP Code)				

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Debtor 1 Dawn J. Conti

Pa	Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	□ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value	
	Steve Conti Belton, SC 29627	123 Dawn Avenue Rockford, IL 61107	20	011 Ford Flex	\$10,000.00	
Pa	rt 10: Give Details About Environmental Inform	ation				
For	the purpose of Part 10, the following definitions	apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su Site means any location, facility, or property as	ir, land, soil, surface water, groun bstances, wastes, or material. defined under any environmental	ndwa	ter, or other medium, including st	atutes or	
	to own, operate, or utilize it, including disposal Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	mental law defines as a hazardou	s wa	aste, hazardous substance, toxic s	substance,	
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n th	ey occurred.		
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e un	der or in violation of an environme	ental law?	
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	nd	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of any release of hazardous material?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	nd	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.					
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case	
Pa	rt 11: Give Details About Your Business or Cor	nections to Any Business				
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	□ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation					
	An owner of at least 5% of the voting or equity securities of a corneration					

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. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person

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Fill in this infor	mation to identify your	case:		
Debtor 1	Dawn J. Conti			
	First Name	Middle Name	Last Name	—
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
(Spouse II, IIIIIIg)	First Name			
United States Ba	ankruptcy Court for the:	NORTHERN DIST	FRICT OF ILLINOIS	_
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
		n for Indiv	riduals Filing Under Cha	anter 7
Statemen	in or intentio	ii ioi iiiaiv	iddais i iiiig Olidei Cii	apter <i>1</i> 12/15
If you are an ind	ividual filing under cha	pter 7. vou must fil	out this form if:	
	e claims secured by yo		. • • • • • • • • • • • • • • • • • • •	
_	sed personal property a		ot expired.	
You must file thi	is form with the court v	vithin 30 days after	you file your bankruptcy petition or by the	date set for the meeting of creditors,
whiche on the	•	ne court extends the	e time for cause. You must also send copie	s to the creditors and lessors you list
	eople are filing togethe nd date the form.	r in a joint case, bo	th are equally responsible for supplying co	rrect information. Both debtors must
Sigil di	id date the form.			
	and accurate as possit our name and case nu		needed, attach a separate sheet to this for	m. On the top of any additional pages,
write y	our name and case nu	inber (ii knowii).		
Part 1: List Y	our Creditors Who Hav	e Secured Claims		
1. For any credit	ors that you listed in P	art 1 of Schedule D	: Creditors Who Have Claims Secured by P	roperty (Official Form 106D), fill in the
information be	elow.		•	,
Identity the cr	editor and the property t	nat is collateral	What do you intend to do with the proper secures a debt?	rty that Did you claim the property as exempt on Schedule C?
				•
Ougalitania B	latiaata <b>M</b> antara		_	<u>_</u>
	Nationstar Mortgage		Surrender the property.	■ No
name:			Retain the property and redeem it.	☐ Yes
Description of	123 Dawn Ave Ro	ckford, IL	Retain the property and enter into a Reaffirmation Agreement.	<b>—</b> 168
property	61107 Winnebago	County	☐ Retain the property and [explain]:	
securing debt				
Dort Or Liet V	aur Unavaired Dereas	I Dramorty I acces		
	our Unexpired Persona ed personal property le		in Schedule G: Executory Contracts and U	nexpired Leases (Official Form 106G), fill
in the information	on below. Do not list rea	al estate leases. Un	expired leases are leases that are still in ef	fect; the lease period has not yet ended.
You may assume	e an unexpired person	al property lease if	the trustee does not assume it. 11 U.S.C. §	365(p)(2).
Describe your u	unexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name: Description of lea	asad			□ No
Property:	aseu			☐ Yes
-				55
Lessor's name:				□ No
Description of lea	ased			□ V
. roporty.				☐ Yes
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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De	otor 1 Dawn J. Conti	Case number (if known)
	scription of leased perty:	☐ Yes
De	sor's name: scription of leased perty:	□ No
Les	sor's name: scription of leased perty:	□ No
Les	sor's name: scription of leased perty:	☐ Yes ☐ No ☐ Yes
Les	sor's name: scription of leased	□ No
	t 3: Sign Below	☐ Yes
	er penalty of perjury, I declare that I have indicated my intention perty that is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal
X	/s/ Dawn J. Conti Dawn J. Conti Signature of Debtor 1	Signature of Debtor 2
	Date November 21, 2016	Date

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-82727 Doc 1 Filed 11/21/16 Entered 11/21/16 17:09:41 Desc Main Document Page 47 of 52

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

In r	re Dawn J. Conti		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COM	PENSATION OF ATTO	RNEY FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contempla	e filing of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	500.00
	Prior to the filing of this statement I have received	ived	\$	500.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed	compensation with any other person	unless they are meml	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed come copy of the agreement, together with a list of the			
5.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspec	ts of the bankruptcy c	ase, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and</li> <li>b. Preparation and filing of any petition, schedules</li> <li>c. Representation of the debtor at the meeting of c</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors reaffirmation agreements and applied</li> <li>522(f)(2)(A) for avoidance of liens of</li> </ul>	s, statement of affairs and plan which reditors and confirmation hearing, a s to reduce to market value; ex- cations as needed; preparation	n may be required; nd any adjourned hear emption planning;	rings thereof;
б.	By agreement with the debtor(s), the above-disclose Representation of the debtors in an any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete statement bankruptcy proceeding.	of any agreement or arrangement for	r payment to me for re	epresentation of the debtor(s) in
1	November 21, 2016	/s/ Daniel A. Spri		
1	Date	Daniel A. Springe Signature of Attorne Springer Law Fir 2222 E State St Suite 107 Rockford, IL 6110 815.312.4725	ey m 04	
		dspringerlaw@g  Name of law firm	mail.com	

Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4725

#### **CHAPTER 7 RETAINER AGREEMENT**

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold.

  Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 102016

Signature:

Print Name:

Attorney Signature:

Attorney Print: Daniel Springer

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#### **United States Bankruptcy Court** Northern District of Illinois

In re	Dawn J. Conti		Case No.	
		Debtor(s)	Chapter 7	
	VE	ERIFICATION OF CREDITOR N	MATRIX	
		Number o	f Creditors:	25
	The above-named Debtor(s) (our) knowledge.	) hereby verifies that the list of cred	itors is true and correct to t	he best of my
Date:	November 21, 2016	/s/ Dawn J. Conti Dawn J. Conti Signature of Debtor		

Acct RCV SVC Attn: Bankruptcy Dept. 5183 Harlem RD STE Loves Park, IL 61111

Armor System Corp 1700 Kiffer Drive 1 Zion, IL 60099

Capital One Bank USA NA Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130

City of Rockford EAS Ambulance Svc. 204 S. 1st Street Rockford, IL 61104

Connie Robinson 1832 Ridgeland Road Rockford, IL 61108

Credit One Bank Attn: Banruptcy Dept. PO Box 98873 Las Vegas, NV 89193

Credit One Bank Attn: Banruptcy Dept. PO Box 98872 Las Vegas, NV 89193

Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101

Dept of Ed/Navient PO Box 9635 Wilkes Barre, PA 18773

Equifax PO Box 740256 Atlanta, GA 30374 Experian PO Box 4500 Allen, TX 75013

First Premier Bank Attn: Bankruptcy Dept. 3820 N Louise Ave Sioux Falls, SD 57107

Kohls/CapOne PO BOX 3115 Milwaukee, WI 53201

Mutual Management Svcs Co, LLC Attn: Bankruptcy Dept PO Box 8740 Rockford, IL 61126

Nationstar Mortgage 350 Highland Drive Lewisville, TX 75067

Physicians Immediate Care 1663 Belvidere Rd Belvidere, IL 61008

Rockford Health Physicians Attn Bankruptcy Dept. Department 4701 Carol Stream, IL 60122-4701

Rockford Mercantile Agency Attn: BAnkruptcy Dept. PO Box 5847 Rockford, IL 61125

Rockford Pain Center Ld 2902 McFarland Rd #202 Rockford, IL 61107

SYNCB/Old Navy DC PO BOX 965005 Orlando, FL 32896

SYNCB/Wal-Mart Attn: Bankruptcy Dept. PO Box 965024 Orlando, FL 32896

TD Bank USA/Target Credit Attn: Bankruptcy Dept. PO Box 673 Minneapolis, MN 55440

TransUnion 555 West Adams Street Chicago, IL 60661

US Bank PO Box 3447 Oshkosh, WI 54903

US Bank PO Box 108 Saint Louis, MO 63166